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OSD(HA), TMA eBPS

Highlights

- ◆ HIPAA Privacy Rule
- ◆ Responsibilities at the MTF Level
- ◆ Stages of Implementation
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HIPAA - Privacy - Implementation

TRICARE Management Activity, Electronic Business Policy & Standards

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 (HIPAA)

HIPAA Privacy Rule

The Military Health System (MHS) must be in compliance with the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule by April 14, 2003. The HIPAA Rule protects the use and disclosure of protected health information (PHI), i.e., individually identifiable health information, including demographics. PHI may be in paper, electronic or verbal medium. The rule requires the MHS to inform the patient of how his or her PHI is being used, provides various patient rights, and restricts information used and disclosed to the "minimum necessary".

Responsibilities at the MTF Level

Using tools provided by the TRICARE Management Activity (TMA) HIPAA Office, military treatment facilities (MTFs) are responsible for implementing the Privacy Rule. The MTF must:

- Designate an MTF HIPAA Privacy Officer
- Review the DoD HIPAA Privacy Regulation
- Map the MTF patient information flow
- Conduct gap analyses and adjust policies/procedures
- Train the workforce
- Introduce the MHS Notice of Privacy Practices
- Establish patient privacy complaint and inquiry procedures
- Assess compliance using the TMA tool

Stages of Implementation

Designate a HIPAA Privacy Officer

Each MTF must designate a HIPAA Privacy Officer (PO). The PO is responsible for overseeing the development and implementation of MTF compliance efforts. He or she will address privacy complaints and serve as an advocate for the patient, relative to health information confidentiality. TMA has provided roles and responsibilities of the PO to help build position descriptions and provide training.

Conduct a Privacy Risk Assessment

Educate: The DoD HIPAA Privacy regulation is the primary source for guidance on implementation of the Privacy Rule within MHS. Review the regulation as a basis for risk assessment. For further clarification of concepts, refer to the HIPAA Privacy Rule itself.

Map Information Flow: Define the internal and external path of PHI. By mapping where PHI is used & disclosed, breaks in the chain of confidentiality can be reinforced and this in turn will identify areas needing greater attention. An example can be found at www.ahima.org/journal/features/feature.0106.1.htm#flow.



Conduct Gap Analyses: Although TMA will provide guidance, it is up to the MTF to define policy gaps and procedural needs at the Service/MTF level. Depending on the scope of this task, a team may be needed to complete this process.

Adjust policies/procedures: Based on the findings of the gap analyses, policies and procedures may need to be revised to incorporate HIPAA requirements.

Train the Workforce

Workforce training is pivotal to the success of HIPAA Privacy implementation. The entire workforce must be trained on MHS privacy policies and procedures and this training must be documented. Under HIPAA, "workforce" includes all employees, volunteers, trainees and other persons whose conduct, in the performance of work for the organization, is under the direct control of the organization, whether or not they are paid by the organization. Training is required for individuals who have no access or contact with PHI as well. Web-based training modules will be made available from the HIPAA Office.

Institute Notice of Privacy Practices

The use of the MHS Notice of Privacy Practices form is required by the DoD HIPAA Privacy Regulation. This form has been designed to meet HIPAA requirements and is standard across the MHS. Appropriate workforce training and beneficiary awareness on the importance of this form is essential to carrying out the spirit of the regulation. MTF business practices must be adjusted to document the patient's acknowledgement of receipt of the Notice of Privacy Practices, file forms appropriately, and in some cases compile an audit trail.

Establish Patient Privacy Complaint and Inquiry Procedures

A patient privacy complaint and inquiry process must be established at each MTF. The HIPAA Privacy Officer should spearhead the review of all privacy concerns, and in coordination with an appropriate decision-making body, render decisions or recommendations regarding patient requested restrictions on the use or disclosure of PHI, patient complaints regarding privacy infringements and MTF compliance with privacy policies.

Assess Compliance

The TMA HIPAA Office will provide Web-based compliance monitoring tools to assess continued compliance with HIPAA Privacy. Focused training will be offered as needed.

Moving Forward

HIPAA is very complex initiative. Complete implementation of the DoD HIPAA Privacy regulations will require a great deal of time, energy and resources in order to reach compliance by April 2003. However, through the use of tools provided by TMA and guidance and support offered to the MTFs, the TMA HIPAA Office is confident that the MHS can implement HIPAA Privacy on schedule. Please contact the TMA HIPAA Office for assistance, guidance or questions.